1771										
lication c	r Dock	et Number								
128,289										
YTITY	OR	OTHER THAN SMALL ENTITY								
FEE		RATE	FEE							
95.00	OR		790.00							
	OR	x\$22=								
	OR	x82=								
	OR	+270=								
	OR	TOTAL	790,							
OTHER THAN NTITY OR SMALL ENTITY										
ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE							
	OR	x\$22=								
	OR	x82=								
	OR	+270=								
	OR	TOTAL ADDIT. FEE								
ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE							
	OR	x\$22=								
	OR	x82=								

PATENT APPLICATION FEE DETERMINATION RECORD  Application or Docket Number											
Effective October 1, 1997											
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMA TYF	LL ENTITY	OR		R THAN ENTITY			
FOR NUMBER FILED		NUMBER	NUMBER EXTRA		FEE		RATE	FEE			
BASIC FEE					395.00	OR		790.00			
TOTAL CLAIMS / minus 20 = *		20 = * .		x\$11=		OR	x\$22=				
INDEPENDENT CLAIMS 9 minus 3 =		ıs 3 =   •		x41=		OR	x82=				
MULTIPLE DEPENDENT CLAIM PRESENT					+135	=	OR	+270=			
* If the difference in column 1 is less than zero, enter *0* in column 2					TOTA		OR	TOTAL	790,		
		CLAIMS AS	AMENDED		*	2 0,1	OTHE	R THAN			
		(Column 1)		(Column 2)	(Column 3)	SMA	LL ENTITY	OR		ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N D	Total	. 9	Minus	-20	=	x\$11:	=	OR	x\$22=		
ME	Independent		Minus	"ク	=	x41=		OR	x82=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135	=	OR	+270=		
					TOT.		OR	TOTAL ADDIT, FEE			
_		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	l r		1			
ENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ğ	Total	· 9	Minus	" <b>D</b>	=	x\$11	=	OR	x\$22=		
AME	Independent	. 2	Minus	3	=	x41=		OR	x82=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135	=	OR	+270=		
(Column 1) (Column 2) (Column 3)				TOT ADDIT. FI		OR	TOTAL ADDIT, FEE				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Δ	Total	. 8	Minus	·· 00	=	x\$11	=	OR	x\$22=		
ME	Independent	・ス	Minus	S	=	x41=	:	OR	x82=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=							OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL  OR TOTAL  ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											